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| FEC FORM 1 | | ORGANIZ | | 13 340 | Office Use Only |
|--|-------------|---|--|-----------------------|---------------------------------|
| 1. NAME OF COMMITTEE (ir | n full) | (Check if name is changed) | Example:If typing, type over the lines. | 12FE4M5 | |
| Moran NR | , | | | | |
| | 1111 | <u> </u> | | | |
| ADDRESS (number and street) (Check if address | | 228 S. Washington Street #115 | | | |
| is changed |) | Alexandria | | LVA L | 22314 |
| | | | CITY | STATE | ZIP CODE |
| COMMITTEE'S E-MA (Check if is change | address | SS (Ptease provide only one kdavis@hdafec.com | | | |
| COMMITTEE'S WEB | PAGE ADI | DRESS (URL) | | | |
| (Check if is change | | | | | |
| 2. DATE | 1 31 | . K K = _ = | | | |
| 3. FEC IDENTIFIC | CATION NU | JMBER C | <u></u> | | |
| 4. IS THIS STATE | MENT 🗵 | NEW (N) OR | AMENDED (A) | | |
| I certify that I have of | examined th | is Statement and to the bes | st of my knowledge and belief | it is true, correct a | and complete. |
| Type or Print Name | of Treasure | Keith A. Davis | 3 | | |
| Signature of Treasure | er _ | Kart M. | lair | Date 01 | 31 / 2013 |
| NOTE: Submission of | | | n may subject the person signing | | he penalties of 2 U.S.C. §437g. |
| Office Use Only | | | For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100 | | FEC FORM 1 (Revised 02/2009) |

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| | FEC Fo | orm 1 (Revised 02/2009) Page 2 | 2 |
|-------------|----------------|---|-----------|
| TYPI | E OF C | COMMITTEE | |
| Can | didate | e Committee: | |
| (a) | | This committee is a principal campaign committee. (Complete the candidate information below.) | |
| (b) | | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the cancinformation below.) | didate |
| Nam Cano | e of didate | | 1 1 |
| | didate | Office State | |
| rarty | / Affiliati | tion Sought: House Senate President District | |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Nam Cand | e of didate | | |
| Par | ty Con | mmittee: | |
| (d) | | (National, State (Democratic, This committee is a or subordinate) committee of the Republican, et | tc.) Par |
| Poli | tical A | Action Committee (PAC): | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization | zation is |
| | | | |
| | | Corporation Corporation w/o Capital Stock Labor Organ | uzation |
| | | Membership Organization Trade Association Cooperative | |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| (f) | | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee. (i.e., nonconnected committee) | or pa |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| Join | t Fund | draising Representative: | |
| (g) | \boxtimes | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more poli committees/organizations, at least one of which is an authorized committee of a federal candidate. | tical |
| (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, none of which is an authorized committee of a federal candidate. | tical |
| | Com | nmittees Participating in Joint Fundraiser | |
| | 1. | MORAN FOR KANSAS | |
| | 2. | NATIONAL REPUBLICAN SENATORIAL COMMITTEE | ~~~ |
| | 3. | | |
| | | | |
| | 4. | | |

| FEC FUIII I | (Revised 02/2009) | <u> </u> |
|---|---|----------------|
| Write or Type Comm | nittee Name | |
| Moran NR | SC Victory Fund | |
| 6. Name of Any Co | onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC S | ponsor |
| NONE , , , | | |
| NONE | | |
| | | |
| Mailing Address | | |
| · | | |
| | | |
| | CITY STATE ZIP CODE | |
| | | |
| Relationship: | Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PA | NC Sponsor |
| 7. Custodian of Rec | cords: Identify by name, address (phone number optional) and position of the person in possession of s. | committee |
| | Keith A. Davis | |
| Full Name | | |
| Mailing Address | 228 S. Washington Street | 1 1 1 |
| | | , , , |
| | Alexandria VA 22314 | |
| Title or Position | CITY STATE ZIP CODE | |
| Treasurer | Telephone number 703 - 549 - 6 | 7705 |
| 8. Treasurer: List the any designated ag | e name and address (phone number optional) of the treasurer of the committee; and the name and ad- lent (e.g., assistant treasurer). | dress of |
| 1 4 11 11 11 11 11 | Keith A. Davis | 1 |
| of Treasurer | 1000 0 Westigner 0 | 1 1 1 |
| Mailing Address | 228 S. Washington Street | أحسا |
| | [#115 | ليبي |
| | Alexandria VA 22314 | |
| Title or Position | CITY STATE ZIP CODE | |
| Treasurer | Telephone number 703 - 549 | 7705 |

DANA K. MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

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